

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

2450000

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	28 minus 20 =	* 8
INDEPENDENT CLAIMS	3 minus 3 =	* —
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X\$ 9=		OR	X\$18=	144
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL		OR	TOTAL	884

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 29	Minus ** 28	= 1
	Independent	* 4	Minus *** 3	= 1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	18—
X40=		OR	X80=	84—
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	2d.

BEST AVAILABLE COPY

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* —	Minus ** —	= —
	Independent	* —	Minus *** —	= —
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

BEST AVAILABLE COPY

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* —	Minus ** —	= —
	Independent	* —	Minus *** —	= —
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 685770

Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	Total
Sim. Lg.				Sim. Entry	Lg. Entry	
Basic Filing Fee	<u>201.101</u>			—	<u>✓ 710</u>	
Total Claims > 20	<u>201.101</u>	<u>28</u>	<u>8</u>	—	<u>18</u>	<u>144</u>
Independent Claims > 1	<u>202.001</u>	—	—	—	—	—
Atk. Dep. Claim Present	<u>204.104</u>			—	—	—
Surcharge	<u>205.001</u>			—	—	—
English Translation	<u>119</u>			—	<u>180</u>	<u>180</u>
<u>TOTAL FEE CALCULATION:</u>						<u>984</u>

Fees due upon filing the application

Total Filing Fees Due = \$ 984.00

Less Filing Fees Submitted = \$

BALANCE DUE = \$ 984.00

Patell
Office of Initial Patent Examination

Figure 7